

Core Concepts

Division of Juvenile Corrections

Moving Forward Together

Issue 5, July 2014

Adverse Childhood Experiences (ACEs) - Part 2

In the June Core Concepts issue, you learned that Adverse Childhood Experiences (ACEs) negatively impact brain development and increase a person's risk for significant health and social problems. This issue presents information on how ACEs are calculated, how they impact a youth's risk for delinquency, and how ACE information can help juvenile justice professionals enhance service to youth in our care.

ACE Score

The ACE Score Calculator is a simple tool with yes/no questions about ten key areas of childhood abuse and neglect. Questions fall into three categories: things that have happened to you (abuse), things that have not been done for you (neglect), and things that have happened around you (violence). Possible ACE scores range from 0 (no adverse childhood experiences) to 10 (many adverse childhood experiences). The ACE Score Calculator can be found online at: http://acestudy.org/ace_score.

WHAT DOES THE ACE SCORE TELL ME? It tells you if the youth has experienced one or multiple childhood stressors and is at risk of experiencing negative health, social, and behavioral consequences later in life.

WHAT DOES THE ACE SCORE NOT TELL YOU? The ACE score does not tell you a youth's level of resilience or ability to overcome previous trauma, nor does it recommend specific programs/treatments for the youth. The ACE score also doesn't give you the exact percent of risk of experiencing negative health, social, and behavioral consequences later in life or which areas are more likely—it just indicates there is a higher risk for those issues.

HOW SHOULD THE ACE SCORE BE USED? Connecting with the youth through their lived experiences helps to create opportunities for targeted conversation emphasizing their own resilience and motivation.

HOW CAN THE ACE SCORE BE USED WHEN CREATING A TREATMENT PLAN? An ACE score is based on lived experience. When this experience is traumatic and/or reoccurring, it creates toxic stress, which often leads to risky life decisions. When a youth can understand that the lived experience is "not what's wrong with me, it's what happened to me," they may be more willing to pursue treatment areas for those risky life decisions that have gotten them where they are. The ACE score is one tool for discussion and guidance when creating a treatment plan.

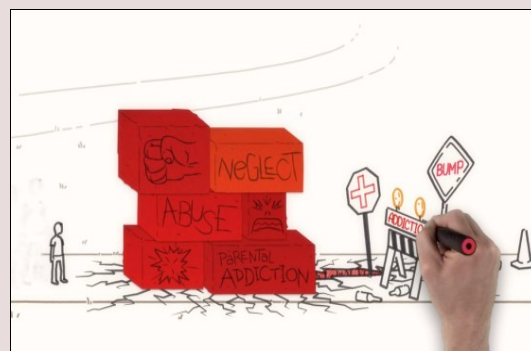
ACEs and Delinquent Behavior

Compared to youth in the general population, youth in the juvenile justice system are more likely to have experienced multiple forms of trauma in childhood, studies show. One study documented that juvenile offenders in the study had about three times more ACEs than the subjects of the original ACE Study. In particular, females in the juvenile justice system have experienced more exposure to sexual assault and interpersonal victimization, and males have higher rates of having witnessed violence. Exposure to parental divorce, parental incarceration, and marital violence have also been associated with juvenile delinquency.

Research indicates that youth with higher ACE scores are at greater risk for developing physical and mental health issues, as well as social and behavioral issues, such as:

- ⇒ Substance abuse
- ⇒ Self-harming behavior
- ⇒ Violent behavior
- ⇒ School-related problems, like disruptive behaviors, substandard performance, and truancy.

Ultimately, these types of behaviors can lead to a youth's involvement in the juvenile justice system. Research also suggests that justice-involved youth with higher ACE scores are also at higher risk to reoffend.



Fostering Resilience

If the youth we work with are continually challenged by their adverse childhood experiences, how should that impact our approach to treating, teaching, supervising, and mentoring them?

People do best when they are living in thriving families and communities. Three protective systems that interact and guide positive adaptation are individual capabilities; attachment and belonging with caring and competent people; and protective community, faith, and cultural processes.

How do some youth with ACEs fare better than others? The research shows us two powerful points:

- ⇒ Resilience is built and strengthened, or weakened, by life experience.
- ⇒ Consistency in the form of a caring, competent adult, makes a great difference. If not a parent, then a teacher, coach, mentor, or therapist.

Core Protective Systems

Capabilities

Attachment & Belonging

Community Culture Spirituality

“Nurturing the healthy development of these protective systems affords the most important preparation or ‘inoculation’ for overcoming potential threats and adversities in human development. Similarly, damage or destruction of these systems has dire consequences for the positive adaptive capacity of individuals.”

Ann Masten, 2009

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In working with our youth, it is important to consider safety, environment, and individual attention. Here are some examples of how all staff can be responsive to youth with ACEs:

“Resilience is attained and maintained through a community of caring adults that can provide at-risk children and their parents with safe, stable, and nurturing relationships. It is through attunement with a safe adult that children become resilient.” - Dr. Tina Marie Hahn

- ⇒ Be aware that a youth’s childhood experiences impact his or her current thoughts, attitudes, and behaviors, and that being in a secure facility may itself be traumatizing to youth.
- ⇒ Help youth to create a positive self image (the 4:1 concept) and to recognize and utilize their strengths.
- ⇒ Ensure a safe environment by being sensitive and responsive to youth’s need to be physically and emotionally safe from harm.
- ⇒ Coach youth in techniques they learn in treatment, such as helping them practice coping with triggers.

References and Additional Resources

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For more information...

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